PATENT APPLICATION FEE DETERMINATION RECOR

Application or Docke: Number

0/516381

| | CLAIMS AS FILED - PART I | | | | | | | | | | | |
|--|--|----------------------|------------------|-----------------------|------------|---------------|----------|-------------------|---------------|------------|--------------------|--------------------|
| | TOTAL CLA | | | (Column 1) | | (Column 2) | | SMAL TYPE | | | ITO | ER THAN |
| ı | · | ···· | | · · | | | | RAT | | | | LL ENTITY |
| | FOR | •. | | NUMBER FILED | | NUMBER EXTRA | | BASIC | | | RAT | |
| 1 | TOTAL CHARGEABLE CLAIMS | | 36 | 36minus 20= | | . 16 | | - | 182 | | BASIC F | EE |
| | INDEPENDENT CLAIMS | | | 4 minus 3 = 1 | | . / | | XS 9 | = 14 | 40 | R XS18 | = |
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| | • If the difference in column 1 is less than zero, enter "0" in column 2 | | | | | | | -145 | • ' | OF | -290= | |
| l | | | | | | | | TOTA | 660 | | L | |
| | CLAIMS AS AMENDED - PART II | | | | | | | | | ~ 1 | | |
| П. | () | CLAIMS | i | (Colum | n 2) St | 2) (Column 3) | | SMAL | L ENTITY | OR | SMALI | R THAN L ENTITY |
| | | REMAINING AFTER | | PREVIOU | A PRESENT | | 11 | BATE | ADDI | | | ADDI- |
| | Total | AMENDMENT | , | PAID FO | DR | EXTRA | | RATE | TIONA | L. | RATE | TIONAL |
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| 3.4 | (Column 1) | | | | | | | DOIT, FEE | 1007100710 | OH | ADDIT. FEE | Programme Common |
| 8 | | CLAIMS | T | (Column | 2) | (Column 3) | | | | - | AUDIT. FEE | |
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| | | (Column 1) | | | .• | • | AD | TOTAL DIT. FEE | | OR | TOTAL DDIT. FEE | |
| Ç | | CLAIMS | | (Column | | Column 3) | | | | -``. | · . | |
| | | REMAINING . | | HIGHEST NUMBER | - 1 | PRESENT | ٠٢ | | ADDI- | ır | | 4001 |
| Ξ. | | AMENDMENT | · | PREVIOUSE PAID FOR | LY | EXTRA | | RATE | TIONAL | | RATE | ADDI- TIONAL |
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| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | | | OR | X86= | |
| | | | | | | | | | | | | |
| - (| "If the "Minhael Atoms a death the entry in column 2 write "n" in column | | | | | | | | | OR | +290= | |
| If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20 enter "20." The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ADDIT. FEE ADDIT. FEE OR ADDIT. FEE OR ADDIT. FEE BM PTO 87 (0) 10 10 10 10 10 10 10 10 10 10 10 10 10 | | | | | | | | | | | | |
| | 270.4 | | 10 BIO1): 10-1 | ndependent) is | the hig | hest number t | ound i | in the appo | opriale box | in colun | nn 1. | |